



**SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT  
BY A CANDIDATE'S COMMITTEE  
(\$1,000 CONTRIBUTIONS OR MORE)**

State Form 48492 (R4 / 11-05)  
Indiana Election Commission (IC 3-9-5-20.1; 3-9-5-22)

**(CFA-11)**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-11  
REPORT

**INSTRUCTIONS:** Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

**COMMITTEE INFORMATION**

1. Full Name of Candidate (include any nickname) <input type="checkbox"/> Check if this is a new name <u>Ronald E. Carter</u>		2. Committee Telephone Number <u>(317) 733-6259</u>	
3. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address <u>13312 Sedgwick Lane</u>			
4. City <u>Carmel</u>	State <u>IN</u>	ZIP Code <u>46074</u>	5. Party Affiliation or If Independent Candidate <u>Republican</u>
6. Office Sought (include district number, if any. Not required for exploratory committee.) <u>Carmel City Council- At-Large</u>			7. County of Residence <u>Hamilton</u>
8. Reporting Period: From: _____ Through: _____			

For classification, enter INDV for individual; PAC for political action committee; CORP for corporation; LAB for labor organization; NONE for all entries which are not one of the above categories.

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS street, number, city, state, ZIP code		THIRD CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY
Classification <u>PAC</u>	1. <u>Advantage Indiana Political Action Committee PO Box 55583 Indpls, IN 46205</u>  Contributor's Occupation (if applicable) _____	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) <u>website</u>  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) _____	<u>1250.00</u>	<u>4/11/11</u>
Classification <u>2.</u>	_____  Contributor's Occupation (if applicable) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) _____		
Classification <u>3.</u>	_____  Contributor's Occupation (if applicable) _____	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) _____  Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify) _____		

**CERTIFICATION**

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS

Title <u>Treasurer</u>	Date (MM-DD-YY) <u>4/14/11</u>
	Date (MM-DD-YY) <u>4/15/2011</u>

be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A  
Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate  
report commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil

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